

M05000001461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

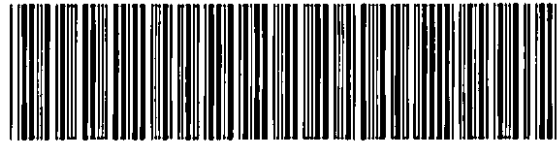
(Business Entity Name)

(Document Number)

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18 SEP - 6 11:23

STATE OF FLORIDA  
DEPARTMENT OF REVENUE


18 SEP - 6 PM 4:17

FILING

SEP - 7 2018

S. PRATHER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 376690 4355598  
AUTHORIZATION :   
COST LIMIT : \$25.00

ORDER DATE : September 6, 2018  
ORDER TIME : 3:19 PM  
ORDER NO. : 376690-045  
CUSTOMER NO: 4355598

FOREIGN FILINGS

NAME: SPOT BUY SPOT, LLC

CORPORATE  
 LIMITED PARTNERSHIP  
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY  
 CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: \_\_\_\_\_

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Spot Buy Spot, LLC

\_\_\_\_\_  
(Name of limited liability company)

Minnesota

\_\_\_\_\_  
(Jurisdiction of its organization)

03/17/2005

\_\_\_\_\_  
(Date registered with Florida Department of State)

M05000001461

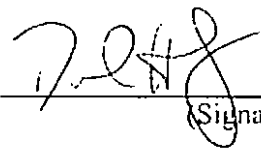
\_\_\_\_\_  
(Florida Document Number)

18 SEP - 11:23

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



\_\_\_\_\_  
(Signature of authorized representative)

Derek H. Squire, Vice President

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**